

05/01/22

LOUISIANA MEDICAID MANAGEMENT INFORMATION SYSTEM
DEPT OF HEALTH AND HOSPITALS - BUREAU OF HEALTH SERVICES FINANCING
LOUISIANA MEDICAID PHARMACY BENEFITS MANAGEMENT UNIT SERVICES FINANCING

APPENDIX C
PAGE 1

ONLY THESE COMPANIES PRODUCTS ARE COVERED AND ONLY THOSE
DOSAGE FORMS LISTED IN APPENDIX A

MEDICAID DRUG FEDERAL REBATE PARTICIPATING PHARMACEUTICAL COMPANIES

LABELER
CODE

PHARMACEUTICAL COMPANY

EFFECTIVE
DATE

END
DATE